| Fill in | n this inform | ation to identify you | r case: | | | | |
|------------------|------------------------------|---|--|--|-------------|----------------------------------|---------|
| Debt | or 1 | Brittany N. Khat | ib | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debte (Spous | or 2 se if, filing) | First Name | Middle Name | Last Name | | | |
| Linite | nd States Ban | kruptcy Court for the: | EASTERN DISTRICT O | E WISCONSIN | | | |
| Office | d States Dai | ikrupicy Court for the. | EAGTERN DIGITION OF | Widdowall | | | |
| Case (if know | | 1-21913 | | | _ | Check if this is ar | า |
| | | | | | i | amended filing | |
| Be as | complete a | nd accurate as possi out all of your schedu | ible. If two married people lles first; then complete th | d Certain Statistical Information are filing together, both are equally responsible information on this form. If you are filing an | ble for sup | | ou file |
| your o | | ns, you must fill out a arize Your Assets | ı new <i>Summary</i> and check | the box at the top of this page. | | | |
| | | | | | _ | our assets alue of what you | own |
| 1. | Schedule A/ 1a. Copy line | B: Property (Official Fe 55, Total real estate, | Form 106A/B) from Schedule A/B | | | 187, | ,404.00 |
| | 1b. Copy line | e 62, Total personal pr | operty, from Schedule A/B | | \$ | 47, | ,391.00 |
| | 1c. Copy line | e 63, Total of all proper | rty on Schedule A/B | | \$ | 234, | ,795.00 |
| Part 2 | 2: Summa | arize Your Liabilities | | | | | |
| | | | | | _ | our liabilities mount you owe | |
| | | | Claims Secured by Property umn A, Amount of claim, at t | (Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule</i> | D \$ | 188, | ,968.00 |
| | | | e Unsecured Claims (Official t 1 (priority unsecured claims | Form 106E/F) s) from line 6e of <i>Schedule E/F</i> | \$ | 5 | 0.00 |

Your total liabilities \$_____

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....

Part 3: Summarize Your Income and Expenses

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

228,468.00

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____6,519.56

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| ebtor 1 | Brittany N. Khatib | | | |
|--|---|--|---|---|
| | | iddle Name Last Name | | |
| ebtor 2 Spouse, if filing) | First Name N | iddle Name Last Name | | |
| nited States E | Bankruptcy Court for the: EASTE | RN DISTRICT OF WISCONSIN | | |
| ase number | 21-21913 | | | ☐ Check if this is a |
| fficial F | orm 106A/B | | | amended filing |
| | le A/B: Property | | | 12/15 |
| Do you own o | , , , | in any residence, building, land, or similar property? | | |
| Yes. Where | e is the property? | | | |
| | e is the property? | What is the property? Check all that apply | | |
| 1 804 W. N | ne is the property? **Montclaire Ave.** **s, if available, or other description | What is the property? Check all that apply Single-family home □ Duplex or multi-unit building □ Condominium or cooperative | the amount of any se | ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property. |
| 1 804 W. N | Nontclaire Ave. s, if available, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any se | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? |
| 804 W. N Street addres | Montclaire Ave. ss, if available, or other description WI 53201-700 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Current value of the entire property? \$187,404. Describe the nature (such as fee simple | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Start 404.0 e of your ownership interest e, tenancy by the entireties, of |
| 804 W. N Street addres | Montclaire Ave. ss, if available, or other description WI 53201-700 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current value of the entire property? \$187,404. | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Start 404.0 e of your ownership interest e, tenancy by the entireties, of |
| 804 W. N Street addres Glendale City | Montclaire Ave. s, if available, or other description WI 53201-700 State ZIP Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Current value of the entire property? \$187,404. Describe the nature (such as fee simple | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Start 404.0 e of your ownership interest e, tenancy by the entireties, of |
| 804 W. N Street addres Glendale City | Montclaire Ave. s, if available, or other description WI 53201-700 State ZIP Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$187,404. Describe the nature (such as fee simple a life estate), if known in the control of the contr | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Start 404.0 e of your ownership interest e, tenancy by the entireties, of |
| 804 W. N Street address Glendale City | Montclaire Ave. s, if available, or other description WI 53201-700 State ZIP Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite | Current value of the entire property? \$187,404. Describe the nature (such as fee simple a life estate), if knot constructions) | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Start 404.0 e of your ownership interest, tenancy by the entireties, cwn. |
| 804 W. N Street address Glendale City | Montclaire Ave. s, if available, or other description WI 53201-700 State ZIP Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | current value of the entire property? \$187,404. Describe the nature (such as fee simple a life estate), if kno | ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? Secured Start, 404.0 The of your ownership interest experiments, tenancy by the entireties, cown. |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Del | otor 1 📙 | Brittany N. Kl | natib | | Case number (if known) | 21-21913 |
|-------------|--|--|---|--|----------------------------|--|
| 3. C | ars, vans, | trucks, tracto | ors, sport utility vel | hicles, motorcycles | | |
| |] No | | | | | |
| | Yes | | | | | |
| | | | | | | |
| 3. | 1 Make: | Subaru | | Who has an interest in the property? Check one | | cured claims or exemptions. Put v secured claims on Schedule D: |
| | Model: | Outback | | Debtor 1 only | | ave Claims Secured by Property. |
| | Year: | 2017 | | Debtor 2 only | Current value of | |
| | | nate mileage: formation: | 82000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | ood condition | n - nrivate | At least one of the debtors and another | | |
| | party v | | on private | Check if this is community property (see instructions) | \$16,379 | 9.00 \$16,379.00 |
| 5 A Par Do | No Yes Add the dopages you The pages you own of the pages in the pag | bollar value of the have attached be Your Person or have any leg | notors, personal wa he portion you ow d for Part 2. Write t al and Household Ite gal or equitable int | d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy in for all of your entries from Part 2, including that number here | cle accessories | \$16,379.00 Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | □ No ■ Yes. De | escribe | | | | |
| | | | kitchen appliand | ces, table, chairs, couch and entertainr | ment center | \$3,500.00 |
| [| | Televisions and including cell prescribe | | eo, stereo, and digital equipment; computers, p edia players, games | rinters, scanners; music o | collections; electronic devices |
| 9. E | ■ No □ Yes. De Equipment Examples: | Antiques and fi other collection escribe for sports and | ns, memorabilia, col d hobbies raphic, exercise, an | prints, or other artwork; books, pictures, or other lectibles d other hobby equipment; bicycles, pool tables | | |
| _ | □ No ■ Xaa Da | 9 | | | | |
| | Yes. De | escribe | | | | |
| | | | Bikes, tennis ra | cket, snowboard | | \$200.00 |

| - | ו וטוטפ | Brittany N. K | natib | | | | Case number | (IT KNOWN) | 21-21913 |
|-----|------------------|--|--------------|---------------------|------------|--|--------------------|-------------|--|
| 10. | Firearm Examp | ns <i>les:</i> Pistols, rifles | s, shotgui | ns, ammunition, a | and relate | d equipment | | | |
| | | Describe | | | | | | | |
| 11. | □ No · | | othes, fur | s, leather coats, | designer | wear, shoes, accessories | | | |
| | | | wome wear | n's pants, shii | rts, dres | ses, winter jackets, sho | es, and athletic | | \$250.00 |
| | ■ No | | welry, cos | stume jewelry, er | ngagemer | nt rings, wedding rings, heirlod | om jewelry, watche | es, gems, ç | gold, silver |
| | Examp. □ No | m animals les: Dogs, cats, b | oirds, hor | ses | | | | | |
| | — 165. | Describe | Cat D | | | | | 7 | \$80.00 |
| | | | Cat, D | og | | | | | |
| | ■ No | ner personal and | | - | did not al | ready list, including any he | alth aids you did | not list | |
| 15 | | | | | | including any entries for pa | ages you have att | ached | \$4,430.00 |
| | | scribe Your Financ | | | | | | | |
| Do | you ow | n or have any le | egal or e | quitable interes | t in any c | of the following? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | les: Money you h | | | | a safe deposit box, and on h | nand when you file | your petiti | on |
| | | | | | | certificates of deposit; shares he same institution, list each. | | rokerage l | nouses, and other similar |
| | _ | | | | | Institution name: | | | |
| | | | 17.1. | Checking | | UW Credit Union | | | \$1,000.00 |
| | | | 17.2. | Savings | | Landmark Credit Union | 1 | | \$500.00 |
| 18. | Examp | mutual funds, o | | | | e firms, money market accou | unts | | |
| | ■ No □ Yes | | | Institution or issu | uer name: | | | | |

| D | ebtor 1 Brittany N. I | Khatib | | Case number (if known) 21-2 | 21913 |
|-----|--|---|--|------------------------------------|---|
| 19 | joint venture | tock and interests in incor | porated and unincorporated busines | ses, including an interest in ar | n LLC, partnership, and |
| | ■ No □ Yes. Give specific inf | formation about them Name of entity: | | % of ownership: | |
| 20 | Negotiable instruments Non-negotiable instrun | s include personal checks, c | gotiable and non-negotiable instrume ashiers' checks, promissory notes, and transfer to someone by signing or delive | money orders. | |
| | ■ No □ Yes. Give specific info | ormation about them Issuer name: | | | |
| 21. | . Retirement or pension Examples: Interests in □ No | | , 403(b), thrift savings accounts, or othe | r pension or profit-sharing plans | |
| | ■ Yes. List each accour | nt separately. Type of account: | Institution name: | | |
| | | WRS Pension | WRS/EFT | | \$25,082.00 |
| 22. | | ed deposits you have made | so that you may continue service or use t, public utilities (electric, gas, water), te | | r others |
| | Yes | | Institution name or individual: | | |
| 23 | . Annuities (A contract fo | or a periodic payment of mo | ney to you, either for life or for a numbe | r of years) | |
| | | suer name and description. | | | |
| 24. | . Interests in an education 26 U.S.C. §§ 530(b)(1), ■ No | | qualified ABLE program, or under a | qualified state tuition program | |
| | | nstitution name and descripti | ion. Separately file the records of any in | terests.11 U.S.C. § 521(c): | |
| 25 | . Trusts, equitable or fu ■ No | iture interests in property | (other than anything listed in line 1), | and rights or powers exercisal | ole for your benefit |
| | ☐ Yes. Give specific inf | formation about them | | | |
| 26 | | | and other intellectual property eeds from royalties and licensing agree | ments | |
| | ☐ Yes. Give specific inf | formation about them | | | |
| 27 | | , | bles operative association holdings, liquor lid | censes, professional licenses | |
| M | oney or property owed | to you? | | : | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | . Tax refunds owed to y ■ No | /ou | | | |
| | ☐ Yes. Give specific info | ormation about them, includ | ing whether you already filed the return | s and the tax years | |
| 29 | . Family support Examples: Past due or ■ No | lump sum alimony, spousal | l support, child support, maintenance, d | ivorce settlement, property settle | ment |
| Off | ☐ Yes. Give specific info ficial Form 106A/B | ormation | Schedule A/B: Property | | page 4 |

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Best Case Bankruptcy

| Deb | tor 1 Brittany N. Khatib | | Case number (if known) | 21-21913 |
|--------------|--|--|--|----------------------------|
| 00. | Other amounts | | | |
| | Other amounts someone owes you Examples: Unpaid wages, disability insurance benefits; unpaid loans you made to | | ick pay, vacation pay, workers' compen | sation, Social Security |
| | No Yes. Give specific information | | | |
| _ | Interests in insurance policies Examples: Health, disability, or life insurance; h No | nealth savings account (HSA); | credit, homeowner's, or renter's insuran | ce |
| | Yes. Name the insurance company of each pe | olicy and list its value. | | |
| | Company name: | • | Beneficiary: | Surrender or refund value: |
| | | eral Life Insurance m only no value | Children | \$0.00 |
| | | | | |
| _ | Any interest in property that is due you from If you are the beneficiary of a living trust, expect someone has died. | | ce policy, or are currently entitled to rece | ive property because |
| | No Yes. Give specific information | | | |
| | Claims against third parties, whether or not Examples: Accidents, employment disputes, in | | | |
| _ | No Yes. Describe each claim | | | |
| | Other contingent and unliquidated claims of No Yes. Describe each claim | every nature, including cour | nterclaims of the debtor and rights to | set off claims |
| | Any financial assets you did not already list | | | |
| _ | No | | | |
| | Yes. Give specific information | | - | |
| 36. | Add the dollar value of all of your entries fr for Part 4. Write that number here | | | \$26,582.00 |
| Part | 5: Describe Any Business-Related Property You | Own or Have an Interest In. List | any real estate in Part 1. | |
| 37. D | o you own or have any legal or equitable interest | in any business-related property | ? | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing- If you own or have an interest in farmland, list it in | | ve an Interest In. | |
| 46. [| Do you own or have any legal or equitable in | terest in any farm- or comme | ercial fishing-related property? | |
| | No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| Part | 7: Describe All Property You Own or Have a | an Interest in That You Did Not Li | ist Above | |

| Debt | tor 1 _ | Brittany N. Khatib | Case number (i | f known) 21-2 | 21913 |
|--------|-----------|--|----------------|----------------------|--------------|
| | | ave other property of any kind you did not already list s: Season tickets, country club membership | ? | | |
| | No | | | | |
| | l Yes. Gi | ve specific information | | | |
| 54. | Add the | dollar value of all of your entries from Part 7. Write th | at number here | | \$0.00 |
| Part 8 | 8: Li | st the Totals of Each Part of this Form | | | |
| 55. | Part 1: 1 | Total real estate, line 2 | | | \$187,404.00 |
| 56. | Part 2: 1 | Total vehicles, line 5 | \$16,379.00 | | |
| 57. | Part 3: 1 | Total personal and household items, line 15 | \$4,430.00 | | |
| 58. | Part 4: 1 | Total financial assets, line 36 | \$26,582.00 | | |
| 59. | Part 5: 1 | Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: 1 | Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: 1 | Fotal other property not listed, line 54 + | \$0.00 | | |

\$47,391.00

Copy personal property total

\$47,391.00

\$234,795.00

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 6
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Best Case Bankruptcy

| Fill in this infor | | | | |
|---------------------|--------------------------|--------------------|-------------|--------------------------------------|
| Debtor 1 | Brittany N. Khatib |) | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | F WISCONSIN | |
| Case number | 21-21913 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming? Check one only, even if your spo |
|----|--|

- ouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

Part 1: Identify the Property You Claim as Exempt

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption. | | ount of the exemption you claim | Specific laws that allow exemption |
|---|---|--|---|------------------------------------|
| | | | | |
| 804 W. Montclaire Ave. Glendale, WI 53201-7000 Milwaukee County | \$187,404.00 | | \$16,336.00 | Wis. Stat. § 815.20 |
| 2020 Property Tax Bill Est. FMV \$203,700 less 8% cost of sale puts value at \$187,404 Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| kitchen appliances, table, chairs, | \$3,500.00 | | \$3,500.00 | Wis. Stat. § 815.18(3)(d) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| cell phone, tablet Line from Schedule A/B: 7.1 | \$400.00 | | \$400.00 | Wis. Stat. § 815.18(3)(d) |
| Elle Holl Golladde 772. TT | | | 100% of fair market value, up to any applicable statutory limit | |
| Bikes, tennis racket, snowboard Line from Schedule A/B: 9.1 | \$200.00 | | \$200.00 | Wis. Stat. § 815.18(3)(d) |
| Line Holli Golleddie PAB. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| women's pants, shirts, dresses, winter jackets, shoes, and athletic | \$250.00 | | \$250.00 | Wis. Stat. § 815.18(3)(d) |
| wear Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Yes

| Fill in this informa | tion to identify you | ır case: | | | |
|--|--------------------------------|---|---|--|--------------------------|
| Debtor 1 | Brittany N. Khar First Name | tib Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name Last Name | | | |
| United States Bank | ruptcy Court for the: | EASTERN DISTRICT OF WISCONSIN | | | |
| Case number 21 (if known) | -21913 | | | ☐ Check | if this is an |
| | | | | amend | ded filing |
| Official Form | 106D | | | | |
| | | Who Have Claims Secur | ed by Propert | у | 12/15 |
| is needed, copy the A | | If two married people are filing together, both are out, number the entries, and attach it to this form | | | |
| number (if known). 1. Do any creditors ha | ave claims secured by | v vour property? | | | |
| | • | his form to the court with your other schedules. | Vou have nothing also t | o roport on this form | |
| _ | | , | . Tou have nothing else t | o report on this form. | |
| Yes. Fill in a | II of the information | below. | | | |
| Part 1: List All S | Secured Claims | | | 0.4 | |
| | | more than one secured claim, list the creditor separat | | Column B | Column C |
| | | a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name. | S Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Landmark (| Credit Union | Describe the property that secures the claim: | \$17,900.00 | \$16,379.00 | \$1,521.00 |
| Creditor's Name | | 2017 Subaru Outback 82000 miles KBB good condition - private party | | | |
| Attn: Bankr Po Box 510 New Berlin, | 870 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | ity, State & Zip Code | Unliquidated | | | |
| Who owes the debt | ? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | | ☐ An agreement you made (such as mortgage or car loan) | secured | | |
| Debtor 1 and Debt | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | 1 | | |
| ☐ At least one of the | | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this clair community debt | m relates to a | Other (including a right to offset) | | | |
| | Opened 03/20 Last | | | | |

Active

Date debt was incurred 11/09/20

0143

Last 4 digits of account number

| Deb | tor 1 Brittany N | l. Khatib | | Case number (if known) 21-21913 | | | | |
|------|--|--|---|---------------------------------|------------------------------|-----------|--|--|
| | First Name | Middle Na | ame Last Name | , | | | | |
| 2.2 | Unv Of Wi Cu/dovenmue | h | Describe the property that secures the claim: | \$151,582.00 | \$187,404.00 | \$0.00 | | |
| | Creditor's Name | | 804 W. Montclaire Ave. Glendale, WI 53201-7000 Milwaukee County 2020 Property Tax Bill Est. FMV \$203,700 less 8% cost of sale puts value at \$187,404 As of the date you file, the claim is: Check all that | | | | | |
| | | | apply. Contingent | | | | | |
| | Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | | |
| Who | owes the debt? | check one | Disputed Nature of lien. Check all that apply. | | | | | |
| _ | ebtor 1 only | mook one. | ☐ An agreement you made (such as mortgage or s | secured | | | | |
| _ | ebtor 2 only | | car loan) | | | | | |
| | ebtor 1 and Debtor 2 | ? only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | | | |
| ПА | t least one of the deb | otors and another | ☐ Judgment lien from a lawsuit | | | | | |
| | Check if this claim re community debt | elates to a | Other (including a right to offset) | | | | | |
| Date | debt was incurred | Opened 04/20 Last Active 12/01/20 | Last 4 digits of account number 5032 | 2 | | | | |
| 2.3 | UW Credit Uni | on | Describe the property that secures the claim: | \$19,486.00 | \$187,404.00 | \$0.00 | | |
| | Creditor's Name | | 804 W. Montclaire Ave. Glendale, WI 53201-7000 Milwaukee County 2020 Property Tax Bill Est. FMV \$203,700 less 8% cost of sale puts | | | | | |
| | Attn: Bankrup Po Box 44963 Madison, WI 5 | • | As of the date you file, the claim is: Check all that apply. ☐ Contingent | | | | | |
| | Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | | |
| | | | ☐ Disputed | | | | | |
| _ | o owes the debt? | check one. | Nature of lien. Check all that apply. | | | | | |
| | ebtor 1 only | | An agreement you made (such as mortgage or s car loan) | secured | | | | |
| | ebtor 2 only Debtor 1 and Debtor 2 |) only | Statutory lien (such as tax lien, mechanic's lien) | | | | | |
| | t least one of the deb | | ☐ Judgment lien from a lawsuit | | | | | |
| □с | Check if this claim re community debt | | Other (including a right to offset) | | | | | |
| | | Opened | | | | | | |
| Date | debt was incurred | 11/19 Last Active 11/20 | Last 4 digits of account number 9201 | 1 | | | | |
| | | | | | | | | |
| Ad | d the dollar value o | f your entries in Co | olumn A on this page. Write that number here: | \$188,968 | 3.00 | | | |
| | his is the last page ite that number her | | the dollar value totals from all pages. | \$188,968 | | | | |
| Part | 2: List Others t | o Be Notified for | r a Debt That You Already Listed | | | | | |
| Use | this page only if yo | u have others to be | e notified about your bankruptcy for a debt that yo | ou already listed in Part 1. F | For example, if a collection | agency is | | |

trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

| Fill in Abic | information to identify your | •••• | | | |
|-----------------|--|----------------------------------|---------------------------|---|-----------------------------|
| | s information to identify your | | | | |
| Debtor 1 | Brittany N. Khatik | Middle Name | Last Name | | |
| Debtor 2 | r not reame | illiadio (tallio | <u> Laot Hamo</u> | | |
| (Spouse if, fil | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT OF | WISCONSIN | | |
| Case num | ber 21-21913 | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| Official | Form 106E/F | | | | |
| | | ha Haya Unasay | rad Claima | | 12/15 |
| | ule E/F: Creditors W | | | Part 2 for creditors with NONPRIORITY of | |
| eft. Attach | | e. If you have no information | | he Part you need, fill it out, number the lo not file that Part. On the top of any ac | |
| 1. Do any | creditors have priority unsecure | d claims against you? | | | |
| ■ No. | Go to Part 2. | | | | |
| ☐ Yes | i. | | | | |
| | | | | | |
| Part 2: | List All of Your NONPRIORIT | | | | |
| | r creditors have nonpriority unsec | | | | |
| ☐ No. | You have nothing to report in this p | art. Submit this form to the cou | rt with your other sche | dules. | |
| ■ Yes | i. | | | | |
| unsecu | red claim, list the creditor separatel | for each claim. For each clain | n listed, identify what t | holds each claim. If a creditor has more /pe of claim it is. Do not list claims already three nonpriority unsecured claims fill out | included in Part 1. If more |
| | | | | | Total claim |
| 4.1 C | hase Card Services | Last 4 digits | of account number | 0742 | \$17,318.00 |
| | onpriority Creditor's Name | | | | |
| | ttn: Bankruptcy o Box 15298 | When was th | e debt incurred? | Opened 04/16 Last Active 12/20 | |
| | /ilmington, DE 19850 | | | | |
| | umber Street City State Zip Code | As of the date | e you file, the claim i | s: Check all that apply | |
| _ | ho incurred the debt? Check one. | _ | | | |
| | Debtor 1 only | ☐ Contingen | | | |
| | Debtor 2 only | ☐ Unliquidate | ed | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | DDIODITY | | |
| | At least one of the debtors and and | | PRIORITY unsecured | ciaim: | |
| | Check if this claim is for a com | | | | -1 |
| | the claim subject to offset? | ☐ Obligation: report as prior | | ration agreement or divorce that you did no | Œ |
| | No | | • | g plans, and other similar debts | |
| | l _{Yes} | Other Co | ecify Credit Card | | |
| _ | 100 | ■ Otner. Spe | City Citate Sala | | |

Page 13 of 42

| Debto | 1 Brittany N. Khatib | | Case number (if known) 21 | -21913 | | | | |
|-------|--|---|-------------------------------------|------------|--|--|--|--|
| 4.2 | Chase Card Services | Last 4 digits of account number | 4267 | \$229.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 06/19 Last Acti | ve | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that yo | ou did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other Specify Credit Card | <u> </u> | | | | | |
| 4.3 | Citibank/The Home Depot | Last 4 digits of account number | 4967 | \$503.00 | | | | |
| | Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 | When was the debt incurred? | Opened 06/19 Last Acti 11/02/20 | <u>-</u> | | | | |
| | St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that yo | ou did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | ☐ Yes | Other Specify Charge Acc | count | | | | | |
| 1.4 | Costco Anywhere Visa Card | Last 4 digits of account number | 8662 | \$752.00 | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 12/14 Last Acti 11/13/20 | ve | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | Is the claim subject to offset? | | | | | | | |
| | | Debte to secretary or section in | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

| Debtor | Brittany N. Khatib | | Case number (if known) | 21-21913 | | | |
|--------|--|--|---------------------------------------|-----------------|--------------|--|--|
| 4.5 | Huntington Bancshares Nonpriority Creditor's Name | Last 4 digits of account number | | _ | \$200,000.00 | | |
| | 7 Easton Oval EA5W29 | When was the debt incurred? | | | | | |
| - | Columbus, OH 43219 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ■ Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce t | hat you did not | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar deb | ots | | | |
| | Yes | ■ Other. Specify Loan for exwas awards | -husband's business ed in divorce. | that he | | | |
| 4.6 | U.S. Bancorp | Last 4 digits of account number | 1803 | _ | \$34.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 800 Nicollet Mall Minneapolis, MN 55402 | When was the debt incurred? | Opened 07/06 Last 11/20 | Active | | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | - | • | | | |
| | No | Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify Credit Card | | | | | |
| 4.7 | Wells Fargo Bank NA Nonpriority Creditor's Name | Last 4 digits of account number | 0473 | | \$9,632.00 | | |
| | Mac F823f-02f Po Box 10438 | When was the debt incurred? | Opened 04/17 Last 12/20 | Active | | | |
| - | Des Moines, IA 50306 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | , | or orlook all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | | |
| | ☐ Check if this claim is for a community | | | | | | |
| | debt Is the claim subject to offset? | ration agreement or divorce t | hat you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | ots | | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 4

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Debtor 1 Brittany N. Khatib | | Case number (if known) | 21-21913 | | | | |
|--|------------------------------------|--|---------------------------|--|--|--|--|
| Name and Address | On which entry in Part 1 or Part 2 | 2 did you list the original creditor? | | | | | |
| Huntington Bancshares | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Prior | ity Unsecured Claims | | | | |
| Attn: GW1N09 5555 Cleveland Ave Columbus, OH 43231 | | oriority Unsecured Claims | | | | | |
| | Last 4 digits of account number | | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| Huntington Bancshares | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Prior | ity Unsecured Claims | | | | |
| Incorporated Huntington Center 41 South High Street Columbus, OH 43287 | | ■ Part 2: Creditors with Nonp | priority Unsecured Claims | | | | |
| | Last 4 digits of account number | | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|--------------|-----|---|-----|----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 6f. | Student loans | 6f. | \$ | Total Claim 0.00 |
| Total claims | 01. | Statistic Island | 01. | Ψ | 0.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 228,468.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 228,468.00 |

| Fill in this infor | Fill in this information to identify your case: | | | | | | |
|---|---|--------------------|-------------|---|------------------------------------|--|--|
| Debtor 1 | Brittany N. Khatik |) | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ | | | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT O | F WISCONSIN | | | | |
| Case number | 21-21913 | | | | | | |
| (if known) | 21 21010 | | | | Check if this is an amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | <u> </u> | | <u> </u> | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | <u> </u> | | |
| | Name | | | | <u> </u> |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | |
| 2.5 | City | | Oldio | 211 0000 | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

| Fill in this | information to identify your | case: | | | |
|--|---|---|--|--|--|
| Debtor 1 | Brittany N. Khatik | | | | |
| Dahtar 0 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | EASTERN DISTRICT OF | WISCONSIN | | |
| Case numb | er 21-21913 | | | | ☐ Check if this is an amended filing |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| people are t fill it out, an your name | filing together, both are equ | ally responsible for suppl boxes on the left. Attach Answer every question. | ying correct information the Additional Page to t | n. If more space is r his page. On the to | ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write |
| □ No | | , | · | | |
| ■ Yes | | | | | |
| 2. With | in the last 8 years, have you a, California, Idaho, Louisiana, | | | | ty states and territories include |
| □ No. | Go to line 3. | | | | |
| _ | Did your spouse, former spou | use, or legal equivalent live | with you at the time? | | |
| [| □ No | | | | |
| I | Yes. | | | | |
| | Abed M. Khatib 9340 North Port Was Bayside, WI 53217 | | Wisconsin | Fill in the name a | nd current address of that person. |
| | Name of your spouse, former spouse, Street, City, State & Zip | | | | |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guarante | or or cosigner. Make su | re you have listed t | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor lame, Number, Street, City, State and Zl | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 9 | Abed M. Khatib 340 North Port Washingt Bayside, WI 53217 | on Rd. | | ☐ Schedule D, I ■ Schedule E/F ☐ Schedule G _ Huntington Bar | , line <u>4.5</u> |

Schedule H: Your Codebtors

| Fill | in this information | to identify your ca | se: | | | | | | | | | |
|---------------|--|---|--|------------------------|----------------------------------|-----------------|------------------|----------------------|------------------------|---------------------------|------------------------------|-----------------|
| Deb | otor 1 | Brittany N. K | hatib | | | | _ | | | | | |
| | otor 2 use, if filing) | | | | | | - | | | | | |
| Unit | ted States Bankru | ptcy Court for the: | EASTERN DISTRICT | OF WISC | CONSIN | | _ | | | | | |
| Cas (If kn | | -21913 | | | | | | □ Ar | | ed filing ent showing | g postpetitior | |
| Of | fficial Form | 106 <u>l</u> | | | | | | M | M / DD/ Y | YYY | - | |
| Sc | chedule I: | Your Inco | me | | | | | | ,, . | | | 12/15 |
| supp spot | olying correct infouse. If you are se characters show | ormation. If you a parated and your | ible. If two married peop are married and not filin spouse is not filing wit On the top of any addition | g jointly th you, d | , and your spo to not include | use i inforr | s livir natio | ng with y n about | you, inclu your spo | ude inform ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your emp information. | loyment | | Debtor | · 1 | | | | Debtor 2 | or non-fil | ing spouse | |
| | If you have more | | Employment status* | ■ Emp | oloyed | | | | ☐ Emplo | oyed | | |
| | attach a separate page with information about additional | Employment status | ☐ Not | employed | | | | ☐ Not e | mployed | | | |
| | employers. | | Occupation | Librar | ian/Teacher | | | | | | | |
| | Include part-time self-employed we | | Employer's name | White | fish Bay Sch | ool [| Distri | ct | | | | |
| | Occupation may or homemaker, it | | Employer's address | | E. Henry Clay ukee, WI 532 | | | | | | | |
| | | | How long employed th | ere? | 3 years | | | | | | | |
| | | | | | *See Attach | ment | for A | ddition | al Emplo | yment Info | ormation | |
| Par | Give De | etails About Mon | thly Income | | | | | | | | | |
| | mate monthly incuse unless you are | | te you file this form. If y | ou have | nothing to repo | rt for | any lir | ne, write | \$0 in the | space. Inc | lude your no | n-filing |
| | u or your non-filing e space, attach a s | | re than one employer, conhis form. | mbine th | e information fo | r all e | mploy | ers for t | hat perso | n on the lir | nes below. If | you need |
| | | | | | | | | For Deb | tor 1 | | otor 2 or ng spouse | |
| 2. | List monthly grodeductions). If n | oss wages, salar oot paid monthly, c | y, and commissions (be alculate what the monthly | efore all p wage w | oayroll ould be. | 2. | \$_ | 5, | 156.67 | \$ | N/A | - |
| 3. | Estimate and lis | st monthly overti | ne pay. | | | 3. | +\$_ | | 0.00 | +\$ | N/A | - |
| 4. | Calculate gross | s Income. Add line | e 2 + line 3. | | | 4. | \$_ | 5,15 | 6.67 | \$ | N/A | |
| | | | | | | | | | | | | |

Official Form 106I

Official Form 106I

Official Form B 6l Attachment for Additional Employment Information

| Debtor | | |
|---------------------|------------------------|--|
| Occupation | Instructor | |
| Name of Employer | UWM | |
| How long employed | 10 years | |
| Address of Employer | 660 W. Washington Ave. | |
| ' ' | Madison, WI 53703 | |

Official Form 106I

| Fill | in this inform | ation to identify yo | our case: | | | | | | | |
|-------------|--|--|-------------------------|---|-------------------------|------------|------|--|-------------------------------|-------|
| | tor 1 | Brittany N. K | | | | Cł | | if this is: | | |
| | ebtor 2epouse, if filing) | | | | | | | an amended filing a supplement show 3 expenses as of t | ving postpetition cha | pter |
| Unit | ited States Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN | | | | | | | MM / DD / YYYY | | |
| | e number 2 | 21-21913 | | | | | | | | |
| | | orm 106J | | | | | | | | |
| | | e J: Your I | | ISES . If two married people a | ere filing together, he | oth are e | nual | lly responsible fo | r supplying correc | 12/15 |
| info nur | ormation. If in the state of th | more space is ne wn). Answer ever | eded, atta y questio | ch another sheet to this | | | | | | |
| Par 1. | t 1: Desc Is this a jo | cribe Your House int case? | hold | | | | | | | |
| | ■ No. Go | to line 2. Des Debtor 2 live i | · | ate household? al Form 106J-2, <i>Expense</i> | os for Sanarata House | shold of D | ehto | ur 2 | | |
| 2. | | | _ | ari omi 1000-2, <i>Expons</i> e | is for deparate frouse | noid of D | CDIC | // Z. | | |
| ۷. | • | ve dependents? Debtor 1 and | □ No ■ Yes. | Fill out this information for each dependent | Dependent's relati | | | Dependent's age | Does dependent live with you? | |
| | Do not stat | | | | Daughter | | | 4 years old | □ No ■ Yes | |
| | | | | | Son | | | 6 years old | □ No ■ Yes □ No | |
| | | | | | | | | | ☐ Yes ☐ No | |
| 3. | expenses | of people other the control of the c | ^{han} ┌ | No Yes | | | | | ☐ Yes | |
| Est exp | t 2: Estin | mate Your Ongoil expenses as of yo a date after the b | ng Monthi our bankri | ly Expenses uptcy filing date unless y is filed. If this is a sup | | | | | | |
| the | | ch assistance and | | government assistance cluded it on <i>Schedule I:</i> | | | | Your expe | enses | |
| 4. | | or home owners | | ses for your residence. | Include first mortgage | e 4. | \$ | | 1,382.49 | |
| | If not inclu | ided in line 4: | | | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | | erty, homeowner's | | | | 4b. | Ť | | 0.00 | |
| | | e maintenance, re eowner's associat | | | | 4c. 4d. | \$ | | 100.00 | |
| 5. | | | | our residence, such as h | ome equity loans | | \$ | | 0.00 | |

Schedule J: Your Expenses Official Form 106J Case 21-21913-kmp Doc 10 Filed 04/22/21 Page 22 of 42

page 1

| Deb | tor 1 | Brittany | N. Khatib | Case nur | nber (if known) | 21-21913 |
|-----|------------------|---------------------|---|----------------------------------|-----------------|-------------------------------|
| 6. | Utilit | ies: | | | | |
| ٠. | 6a. | | , heat, natural gas | 6a | . \$ | 135.00 |
| | 6b. | - | wer, garbage collection | 6b | . \$ | 200.00 |
| | 6c. | Telephone | e, cell phone, Internet, satellite, and cable services | 6c | . \$ | 105.00 |
| | 6d. | Other. Spe | | 6d | . \$ | 0.00 |
| 7. | Food | | ekeeping supplies | 7 | . \$ | 750.00 |
| 8. | | | children's education costs | 8 | · | 200.00 |
| 9. | Cloth | hina. laund | lry, and dry cleaning | 9 | . \$ | 100.00 |
| | | • | products and services | 10 | · - | 100.00 |
| | | | ental expenses | 11. | | 300.00 |
| | | | Include gas, maintenance, bus or train fare. | | | |
| | | | ear payments. | 12 | . \$ | 200.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13 | . \$ | 150.00 |
| 14. | Char | ritable cont | tributions and religious donations | 14 | . \$ | 0.00 |
| 15. | Insu | rance. | - | | | |
| | Do no | ot include ir | nsurance deducted from your pay or included in lines 4 or 20 |). | | |
| | 15a. | Life insura | ance | 15a | | 0.00 |
| | 15b. | Health ins | surance | 15b | . \$ | 0.00 |
| | 15c. | Vehicle in | surance | 15c | . \$ | 132.00 |
| | 15d. | Other insu | urance. Specify: | 15d | . \$ | 0.00 |
| 16. | Taxe | s. Do not in | nclude taxes deducted from your pay or included in lines 4 o | r 20. | | |
| | Spec | • | | 16 | . \$ | 0.00 |
| 17. | | | ease payments: | | _ | |
| | | | ents for Vehicle 1 | 17a | · · · | 354.00 |
| | | | ents for Vehicle 2 | 17b | | 0.00 |
| | 17c. | Other. Spe | ecify: | 17c | · | 0.00 |
| | | Other. Spe | · | 17d. | . \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that you did not | | • | 0.00 |
| 4.0 | | | your pay on line 5, Schedule I, Your Income (Official For | m 106l). 18 | . \$ | |
| 19. | | | s you make to support others who do not live with you. | 40 | \$ | 0.00 |
| | Spec | | | 19 | | |
| 20. | | | perty expenses not included in lines 4 or 5 of this form of | r on Schedule I: Y 20a | | 0.00 |
| | | | s on other property | | | 0.00 |
| | | Real estat | | 20b | | 0.00 |
| | | | homeowner's, or renter's insurance | 20c | | 0.00 |
| | | | nce, repair, and upkeep expenses | 20d | · | 0.00 |
| | | | ner's association or condominium dues | 20e | · - | 0.00 |
| 21. | Othe | r: Specify: | Pet Bills | 21. | +\$ | 80.00 |
| 22. | Calc | ulate vour | monthly expenses | | | |
| | | - | through 21. | | \$ | 4,288.49 |
| | | | 22 (monthly expenses for Debtor 2), if any, from Official Form | 106J-2 | \$ | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 4,288.49 |
| | 220. | Add IIIIe ZZ | a and 22b. The result is your monthly expenses. | | Ψ | 4,266.49 |
| 23. | Calc | ulate your | monthly net income. | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a | . \$ | 3,919.00 |
| | 23b. | Copy your | r monthly expenses from line 22c above. | 23b | \$ | 4,288.49 |
| | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | | _ | 260.40 |
| | | The result | t is your monthly net income. | 23c | . \$ | -369.49 |
| 24. | For ex modifi | xample, do yo | an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you terms of your mortgage? | | | ease or decrease because of a |
| | ■ No | | | | | |
| | $\prod \gamma_i$ | A S | Explain here: | | | |

Official Form 106J Schedule J: Your Expenses page 2

| Fill in this | s information to identify your | case: | | | |
|------------------------------|---|--------------------------|----------------------------------|--|------------|
| Debtor 1 | Brittany N. Khatil |) | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fili | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | EASTERN DISTRICT O | F WISCONSIN | | |
| Case num | ber 21-21913 | | | | |
| (if known) | | | | ☐ Check if this amended filir | |
| | Form 106Dec | ın Individual | Debtor's Scheo | dules | 12/15 |
| | money or property by fraud i poth. 18 U.S.C. §§ 152, 1341, 7 | | rruptcy case can result in fines | s up to \$250,000, or imprisonment for | r up to 20 |
| | Sign Below | | | | |
| Did y | ou pay or agree to pay some | one who is NOT an attor | ney to help you fill out bankru | ptcy forms? | |
| | No | | | | |
| | Yes. Name of person | | | Attach Bankruptcy Petition Prepared Declaration, and Signature (Official | |
| | r penalty of perjury, I declare hey are true and correct. | that I have read the sum | mary and schedules filed with | this declaration and | |
| X /s | s/ Brittany N. Khatib | | X | | |
| | Brittany N. Khatib ignature of Debtor 1 | | Signature of Debtor | 2 | |
| D | Pate April 20, 2021 | | Date | | |
| | | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill | in this information to identify y | our case: | | | |
|---------------------|---|---|--|--|---|
| Deb | otor 1 Brittany N. Kh | | | | |
| Deb | First Name | Middle Name | Last Name | | |
| | use if, filing) First Name | Middle Name | Last Name | | |
| Uni | ted States Bankruptcy Court for th | ne: EASTERN DISTRICT OF | WISCONSIN | | |
| Cas | se number 21-21913 | | | | |
| (if kn | nown) | | | _ | Check if this is an amended filing |
| ○ t | ficial Forms 407 | | | | |
| | ficial Form 107 atement of Financia | I Affairs for Individ | duals Filing for B | ankruntev | 4/19 |
| Be a info num | ns complete and accurate as po rmation. If more space is need ober (if known). Answer every q | ssible. If two married people a ed, attach a separate sheet to uestion. | are filing together, both are this form. On the top of an | equally responsible for su | pplying correct |
| | | Marital Status and Where You | u Lived Before | | |
| 1. | What is your current marital st Married | atus? | | | |
| | ■ Married■ Not married | | | | |
| | | | | | |
| 2. | During the last 3 years, have y | ou lived anywhere other than | where you live now? | | |
| | □ No | | | | |
| | Yes. List all of the places yo | ou lived in the last 3 years. Do no | ot include where you live now | I. | |
| | Debtor 1 Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | 10242 W. Vera Ave. Milwaukee, WI 53224 | From-To: 5/2016 - 5/201 | 9 Same as Debtor | I | ☐ Same as Debtor 1 From-To: |
| | • | California, Idaho, Louisiana, Ne | vada, New Mexico, Puerto R | | |
| 4. | Did you have any income from Fill in the total amount of income If you are filing a joint case and y | you received from all jobs and a | all businesses, including part | time activities. | endar years? |
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | m January 1 of current year und date you filed for bankruptcy: | wages, commissions, bonuses, tips | \$17,591.40 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

Creditor's Name and Address

□ Yes

Dates of payment

attorney for this bankruptcy case.

Total amount paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe

Was this payment for ...

Official Form 107

| Del | btor 1 | Brittany N. Khatib | | Cas | e number (if known) | 21-21913 | |
|-----|----------------------|--|--|---|--|---------------------------------|---|
| | | - | | | | | |
| 7. | <i>Inside</i> of whi | n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny. | rtners; relatives of any gene control, or owner of 20% or | eral partners; partner more of their voting | erships of which you g securities; and ar | u are a genera ly managing a | al partner; corporations gent, including one for |
| | | No Yes. List all payments to an insider. | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | inside Includ | de payments on debts guaranteed or cos | | ments or transfer a | ny property on ac | count of a de | ebt that benefited an |
| | _ ' | No Yes. List all payments to an insider | | | | | |
| | | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name |
| Pai | rt 4: | Identify Legal Actions, Repossession | s and Foreclosures | • | | | |
| rai | l 4. | identify Legal Actions, Repossession | is, and Foreciosures | | | | |
| 9. | List al | n 1 year before you filed for bankrupte Il such matters, including personal injury ications, and contract disputes. | | | | | |
| | □ N | No | | | | | |
| | — \ | Yes. Fill in the details. | | | | | |
| | | e title e number | Nature of the case | Court or agency | | Status of th | e case |
| | | tany N. Khatib vs. Abed Khatib 0CV001962 | Civil - Restraining Order | Milwaukee Cou Courthouse | inty | ☐ Pending ☐ On appe ☐ Conclude | |
| 10. | Check | n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. | | rty repossessed, f | oreclosed, garnis | hed, attached | I, seized, or levied? |
| | | Yes. Fill in the information below. | | | | | |
| | Cred | litor Name and Address | Describe the Property | | Date | | Value of the property |
| | | | Explain what happened | | | | |
| 11. | accol | n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details. | | uding a bank or fir | nancial institution | , set off any a | mounts from your |
| | Cred | litor Name and Address | Describe the action the | creditor took | Date a taken | action was | Amount |
| 12. | court | n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes | | rty in the possessi | ion of an assigned | e for the bene | fit of creditors, a |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Deb | btor 1 Brittany N. Khatib | | C: | ase number (if known) | 21-21913 | |
|-----|---|------------------|--|-----------------------|-----------------------|------------------------|
| | | | | | | |
| Par | rt 5: List Certain Gifts and Contr | ibutions | | | | |
| 13. | ■ No | | did you give any gifts with a total valu | ue of more than \$60 | 00 per person | ? |
| | Yes. Fill in the details for each | | Departure the wifts | Data | | Value |
| | Gifts with a total value of more the per person | ian \$600 | Describe the gifts | the g | s you gave ifts | Value |
| | Person to Whom You Gave the G Address: | ift and | | | | |
| 14. | Within 2 years before you filed for ■ No | bankruptcy, | did you give any gifts or contributions | s with a total value | of more than | \$600 to any charity? |
| | ☐ Yes. Fill in the details for each | gift or contribu | tion. | | | |
| | Gifts or contributions to charities more than \$600 Charity's Name | | Describe what you contributed | | s you ributed | Value |
| | Address (Number, Street, City, State and | ZIP Code) | | | | |
| Par | rt 6: List Certain Losses | | | | | |
| | or gambling? ■ No □ Yes. Fill in the details. | | | | | |
| | Describe the property you lost as how the loss occurred | Includ | ibe any insurance coverage for the load the amount that insurance has paid. Lie nce claims on line 33 of Schedule A/B: F | st pending loss | of your | Value of property lost |
| Par | rt 7: List Certain Payments or Tr | ansfers | | | | |
| 16. | consulted about seeking bankrup Include any attorneys, bankruptcy p | tcy or prepari | id you or anyone else acting on your long a bankruptcy petition? rs, or credit counseling agencies for serv | | | erty to anyone you |
| | ✓ No✓ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, | if Not You | Description and value of any prope transferred | • | payment ansfer was | Amount of payment |
| | Zimmermann Law Offices, S. 8989 N. Port Washington Rd. Suite 208 Bayside, WI 53217 | | Attorney Fees | 12/1 | 0/2020 | \$1,200.00 |
| | Cricket Debt Counseling | | Bankruptcy Course Fees (First Second Course) | and 12/1 | 0/2020 | \$48.00 |
| 17. | | our creditors of | id you or anyone else acting on your lor to make payments to your creditors ted on line 16. | | fer any prope | erty to anyone who |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | | Description and value of any prope transferred | - | payment ansfer was | Amount of payment |
| | | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No | | | | | |
|-----|---|--|---------------------------|-------------|---|---|
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and v property transfer | | paymei | ne any property or nts received or debts exchange | Date transfer was made |
| | Person's relationship to you | | | • | | |
| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro No Yes. Fill in the details. | | y property to a s | elf-settled | trust or similar device of | of which you are a |
| | Name of trust | Description and v | alue of the prop | erty transf | erred | Date Transfer was made |
| | rt 8: List of Certain Financial Accounts, Ins Within 1 year before you filed for bankruptcy sold, moved, or transferred? | • | · | J | | |
| | Include checking, savings, money market, or houses, pension funds, cooperatives, association No Yes. Fill in the details. | | | | shares in banks, credit | unions, brokerage |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accourtinstrument | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed for | bankruptcy, any | / safe depo | osit box or other deposi | tory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe tl | ne contents | Do you still have it? |
| 22. | Have you stored property in a storage unit o | r place other than your | home within 1 y | ear before | you filed for bankrupto | y? |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe tl | he contents | Do you still have it? |
| Par | rt 9: Identify Property You Hold or Control | for Someone Else | | | | |
| | | | ude any property | you borro | owed from, are storing f | or, or hold in trust |
| | ☐ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe tl | he property | Value |
| Par | rt 10: Give Details About Environmental Info | ormation | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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Debtor 1 **Brittany N. Khatib** Case number (if known) 21-21913

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

| Rep | ort a | all notices, releases, and proceedings that | at you | ı know about, regardless of wher | n the | ey occurred. | | | |
|---|--|--|---------|---|-------|--|--------------------|--|--|
| 24. | Has | s any governmental unit notified you that | t you | may be liable or potentially liable | unc | der or in violation of an environme | ntal law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | | nme of site Idress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | | |
| 25. | Hav | ve you notified any governmental unit of | any r | elease of hazardous material? | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it | | | | | | Date of notice | | |
| 26. | Hav | ve you been a party in any judicial or adn | ninist | rative proceeding under any envi | ironi | mental law? Include settlements a | nd orders. | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | | | Court or agency Na Name Address (Number, Street, City, State and ZIP Code) | | ture of the case | Status of the case | | |
| Par | t 11 | Give Details About Your Business or | Conn | ections to Any Business | | | | | |
| 27. | Wit | hin 4 years before you filed for bankrupt | cy, di | d you own a business or have an | ıy of | the following connections to any | business? | | |
| | | ☐ A sole proprietor or self-employed in | n a tra | a trade, profession, or other activity, either full-time or part-time | | | | | |
| | | ■ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing ex | ecutiv | ve of a corporation | | | | | |
| | | ☐ An owner of at least 5% of the voting | g or e | equity securities of a corporation | | | | | |
| ☐ No. None of the above applies. Go to Part 12. | | | | | | | | | |
| | | Yes. Check all that apply above and fill | in the | e details below for each business | S. | | | | |
| | | isiness Name Idress | Des | cribe the nature of the business | | Employer Identification number Do not include Social Security r | | | |
| | | Imber, Street, City, State and ZIP Code) | Nam | ne of accountant or bookkeeper | | Dates business existed | | | |
| | 38 | 383 W Brown Deer Rd Milwaukee, WI 53217 | | ood Business Ex-husband's Business. He was warded in divorce. Debtor was ot involved in the business | | EIN: From-To | | | |
| | | | dire | ectly. | | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

| Debtor | Brittany N. Khatib | C | Case number (if known) | 21-21913 |
|--|--|---|------------------------|---------------------------------|
| | thin 2 years before you filed for bankrup titutions, creditors, or other parties. | tcy, did you give a financial statement to | anyone about your b | ousiness? Include all financial |
| | No | | | |
| | Yes. Fill in the details below. | | | |
| Ac | nme Idress ımber, Street, City, State and ZIP Code) | Date Issued | | |
| Part 12 | Sign Below | | | |
| are true with a b 18 U.S.C /s/ Brittar | and correct. I understand that making a | nancial Affairs and any attachments, and false statement, concealing property, or \$250,000, or imprisonment for up to 20 years. Signature of Debtor 2 | obtaining money or | |
| Date | April 20, 2021 | Date | | |
| Did you ■ No □ Yes | attach additional pages to Your Stateme | ent of Financial Affairs for Individuals Fili | ing for Bankruptcy (| Official Form 107)? |
| ■ No | | t an attorney to help you fill out bankrupt | | al Form 110) |

Best Case Bankruptcy

| Fill in | n this information to identify your case: | | | | | irected in this form and | in Form |
|------------------|---|--|--|-------------------------|-----------------------------------|---|-----------------------------------|
| Debt | tor 1 Brittany N. Khatib | | 12 | 2A-1Sup | p: | | |
| Debt (Spou | tor 2 | | _ | ■ 1. Th | ere is no pres | umption of abuse | |
| Unite | ed States Bankruptcy Court for the: Eastern District of | Wisconsin | | ap | plies will be n | o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2). | |
| | 21-21913 | | | _ | , | • | , |
| (if kno | wii) | | | | | does not apply now be received apply service but it could apply | |
| | | | | ☐ Che | ck if this is a | n amended filing | |
| | <u>icial Form 122A - 1</u> | | | | | | |
| Ch | apter 7 Statement of Your Cur | rent Mor | ithly Inc | ome | ! | | 04/20 |
| attach case i | complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wonumber (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted: Calculate Your Current Monthly Income | which the addition m a presumption | nal information a of abuse becau | applies. (ise you d | On the top of a o not have pri | ny additional pages, wri narily consumer debts o | te your name and or because of |
| 1. | What is your marital and filing status? Check one or | ıly. | | | | | |
| | ■ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | $\hfill\square$ Married and your spouse is filling with you. Fill ou | ut both Columns | A and B, lines | 2-11. | | | |
| | $\hfill\square$ Married and your spouse is NOT filing with you. | You and your s | pouse are: | | | | |
| | ☐ Living in the same household and are not lega | ılly separated. F | Fill out both Co | lumns A | and B, lines 2 | 2-11. | |
| | ☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading | egally separated | l under nonbar | nkruptcy | law that appli | es or that you and you | |
| 10 the | Il in the average monthly income that you received from all 11(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total louses own the same rental property, put the income from that p | onth period would by 6. Fill in the res | be March 1 thro sult. Do not inclu- | ugh Augu de any ind | st 31. If the amo | ount of your monthly incon ore than once. For examp | ne varied during ble, if both |
| | | | | Columi Debtor | | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wages, salary, tips, bonuses, overtime, payroll deductions). | and commission | ons (before all | \$ | 6,519.56 | \$ | |
| 3. | Alimony and maintenance payments. Do not include Column B is filled in. | payments from | a spouse if | \$ | 0.00 | \$ | |
| 4. | All amounts from any source which are regularly part of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spfilled in. Do not include payments you listed on line 3. | . Include regular d, your depender | contributions nts, parents, | \$ | 0.00 | \$ | |
| 5. | Net income from operating a business, profession, | | | | | | |
| | | | tor 1 | | | | |
| | Gross receipts (before all deductions) | \$ <u>0.00</u> -\$ <u>0.00</u> | | | | | |
| | Ordinary and necessary operating expenses Net monthly income from a business, profession, or far | | Copy here -> | . \$ | 0.00 | \$ | |
| 6. | Net income from rental and other real property | ш ф | оору пого и | Ψ | | <u> </u> | |
| 0. | not modifie from rental and other real property | Deb | tor 1 | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 | | | | | |
| | Ordinary and necessary operating expenses | -\$ 0.00 | | | | | |
| | Net monthly income from rental or other real property | \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| 7 | Interest dividends and royalties | | | \$ | 0.00 | \$ | |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

7. Interest, dividends, and royalties

| Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act, Instead, list it here: For you \$ 0.00 For your spouse Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuty, or allowance paid by the discharge of the control to the property of the security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuty, or allowance paid by the discharge of the annut of retiring by a to which you would otherwise be entitled graded under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the annut of retiring by a to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. Do not include any benefits received under the Social Security Act; payments made in the latest sources not tisted above. Specify the source and amount. Do not include any benefits received as a wickin of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuty, or allowance paid by the full international compensation pay and pay and the security Act; payments made and the security Act. Payments made and the security of the security Act. Payments made and the security of the security Act. Payments made and the security of t | | | Column A Debtor 1 | | Debtor 2 or non-filing spouse | |
|---|--|--|-------------------|--------------|-------------------------------|--|
| Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combart-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 0, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under chapter 61 of that title, 0.000 is included any provision of title 10 other than chapter 61 of that title. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1001 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war circuit, a crime against humanity, or international of off one section of a semble of the submined of the s | the Social Security Act. Instead, list it here: For you | \$\$ | · — | 0.00 | \$ | _ |
| Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus diseases 2019 (COVID-19); payments received as a victim of a var crime, a crime against humanity, or international or domestic terrorism; or compensation persion, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. **Social Compensation** **Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Calculate your current monthly income for the year. Follow these steps: Determine Whether the Means Test Applies to You Calculate your current monthly income from line 11 | Pension or retirement income. Do not income. Do not income benefit under the Social Security Act. Also, not include any compensation, pension, pay United States Government in connection wire disability, or death of a member of the uniformal pay paid under chapter 61 of title 10, then in does not exceed the amount of retired pay to | clude any amount received that was a except as stated in the next sentence, y, annuity, or allowance paid by the tith a disability, combat-related injury or armed services. If you received any retinctude that pay only to the extent that it to which you would otherwise be entitled. | red t | 0.00 | | |
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| each column. Then add the total for Column A to the total for Column B. Section | Total amounts from separate page | es, if any. | + \$ | 0.00 | \$ | _ |
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| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | Calculate your current monthly income for 12a. Copy your total current monthly income for 12b. Copy your total current monthly income Multiply by 12 (the number of months in 12b. The result is your annual income for the Calculate the median family income that Fill in the state in which you live. Fill in the number of people in your househor Fill in the median family income for your stated To find a list of applicable median income a for this form. This list may also be available thow do the lines compare? 14a. Line 12b is less than or equal to Go to Part 3. Do NOT fill out or 14b. Line 12b is more than line 13. Contact the compare than line 13. Contact the contact that the compare than line 14. Contact the contact that the co | for the year. Follow these steps: e from line 11 in a year) his part of the form applies to you. Follow these steps: WI bid. 3 ate and size of household. amounts, go online using the link specificat the bankruptcy clerk's office. to line 13. On the top of page 1, check r file Official Form 122A-2. On the top of page 1, check box 2, The | ied in the sepa | rate instruc | tions \$ \$ 12b. \$ 13. \$ | 6,519.56 12 78,234.72 88,431.00 |
| | Calculate your current monthly income for 12a. Copy your total current monthly income for 12b. Copy your total current monthly income Multiply by 12 (the number of months in 12b. The result is your annual income for the Calculate the median family income that Fill in the state in which you live. Fill in the number of people in your househor Fill in the median family income for your stated To find a list of applicable median income and for this form. This list may also be available thow do the lines compare? 14a. Line 12b is less than or equal to Go to Part 3. Do NOT fill out or 14b. Line 12b is more than line 13. Go to Part 3 and fill out Form 1 | for the year. Follow these steps: e from line 11 in a year) his part of the form applies to you. Follow these steps: WI bid. 3 ate and size of household. amounts, go online using the link specificat the bankruptcy clerk's office. to line 13. On the top of page 1, check r file Official Form 122A-2. On the top of page 1, check box 2, The | ied in the sepa | rate instruc | tions \$ \$ 12b. \$ 13. \$ | 6,519.56 12 78,234.72 |

Official Form 122A-

Brittany N. Khatib 21-21913 Debtor 1 Case number (if known)

Signature of Debtor 1

Date April 20, 2021

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2020 to 03/31/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: UWM

Income by Month:

| 6 Months Ago: | 10/2020 | \$3,293.73 |
|---------------|--------------------|------------|
| 5 Months Ago: | 11/2020 | \$0.00 |
| 4 Months Ago: | 12/2020 | \$1,685.17 |
| 3 Months Ago: | 01/2021 | \$1,608.57 |
| 2 Months Ago: | 02/2021 | \$1,608.57 |
| Last Month: | 03/2021 | \$164.15 |
| | Average per month: | \$1,393.37 |

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Whitefish Bay School

Income by Month:

| 6 Months Ago: | 10/2020 | \$6,772.63 |
|---------------|--------------------|------------|
| 5 Months Ago: | 11/2020 | \$4,674.15 |
| 4 Months Ago: | 12/2020 | \$5,100.27 |
| 3 Months Ago: | 01/2021 | \$4,734.72 |
| 2 Months Ago: | 02/2021 | \$4,759.92 |
| Last Month: | 03/2021 | \$4,715.47 |
| | Average per month: | \$5,126.19 |

Best Case Bankruptcy

| Fill in this inform | nation to identify your ca | 350. | | |
|------------------------------------|--|--------------------|---|--|
| Debtor 1 | Brittany N. Khatib | 150. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | EASTERN DISTR | RICT OF WISCONSIN | |
| Case number | 21-21913 | | | |
| (if known) | | | | Check if this is an amended filing |
| | | | | amended ming |
| Official Fo | rm 108 | | | |
| | | for Indiv | riduals Filing Under Chapto | er 7 |
| | | | | |
| | vidual filing under chapt e claims secured by you | - | I out this form if: | |
| _ | ed personal property an | | ot expired. | |
| | | | you file your bankruptcy petition or by the date so time for cause. You must also send copies to the | |
| on the f | form | | • | |
| | eople are filing together indicate the form. | n a joint case, bo | th are equally responsible for supplying correct in | nformation. Both debtors must |
| Be as complete a | and accurate as possible | . If more space is | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| write yo | our name and case numb | per (if known). | | |
| Part 1: List Yo | our Creditors Who Have | Secured Claims | | |
| | | t 1 of Schedule D | : Creditors Who Have Claims Secured by Propert | y (Official Form 106D), fill in the |
| information be Identify the cre | editor and the property that | nt is collateral | What do you intend to do with the property tha | |
| | | | secures a debt? | as exempt on Schedule C? |
| Creditor's La | andmark Credit Unior | 1 | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | = |
| Description of | 2017 Subaru Outbac | ck 82000 | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property | miles KBB good condition | n - nrivate | ☐ Retain the property and [explain]: | |
| securing debt: | party value | Pilvato | | |
| | | | _ | _ |
| Creditor's U name: | nv Of Wi Cu/dovenmเ | ien | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | 204 W. Montoloiro A | | Retain the property and enter into a | ■ Yes |
| property | 804 W. Montclaire A Glendale, WI 53201- | | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | Milwaukee County | DILL EAST EMIX | Control of the property and [explain]. | |
| | 2020 Property Tax E \$203,700 less 8% co | st of sale | | |
| | puts value at \$187,4 | | | _ |
| | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

page 1

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Creditor's UW Credit Union

Best Case Bankruptcy

☐ No

| Debtor 1 Brit | tany N. Khatib | Case number (if known) | 21-21913 |
|--------------------------------------|--|---|-----------------------------------|
| name: | | ☐ Retain the property and redeem it. | ■ Yes |
| Description of property securing deb | Glendale, WI 53201-7000 | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | _ |
| or any unexpi n the informati | on below. Do not list real estate leases | ses sted in Schedule G: Executory Contracts and Unexpire s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | e lease period has not yet ended. |
| Describe your | unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: Description of le | eased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's name: Description of le | eased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's name: | | | □ No |
| Description of le Property: | eased | | ☐ Yes |
| Lessor's name: | | | □ No |
| Description of le Property: | eased | | ☐ Yes |
| Lessor's name: | | | □ No |
| Description of le Property: | eased | | ☐ Yes |
| Lessor's name: | oppod | | □ No |
| Description of le Property: | eased | | ☐ Yes |
| Lessor's name: | | | □ No |
| Description of le Property: | eased | | ☐ Yes |
| Part 3: Sign | Below | | |
| Inder penalty of | | d my intention about any property of my estate that se | cures a debt and any personal |
| X /s/ Britta | ny N. Khatib | X | |
| Brittany | N. Khatib of Debtor 1 | Signature of Debtor 2 | |
| Date | April 20, 2021 | Date | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$78 | administrative fee |
| + \$15 | trustee surcharge |
| \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Best Case Bankruptcy

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| _ | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Wisconsin

| In re | Brittany N. Khatib | | Case No. | 21-21913 | |
|-------|---|---|----------------------|----------------------------------|-------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOR | NEY FOR DE | BTOR(S) | |
| co | ursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 201 ompensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, o | or agreed to be paid | to me, for services rendered or | to |
| | For legal services, I have agreed to accept | | \$ | 1,200.00 | |
| | Prior to the filing of this statement I have received | | | 1,200.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | I have not agreed to share the above-disclosed com | npensation with any other person u | nless they are memb | pers and associates of my law f | firm. |
| | I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name | | | | A |
| 5. Iı | n return for the above-disclosed fee, I have agreed to | render legal service for all aspects | of the bankruptcy c | ase, including: | |
| b. | Analysis of the debtor's financial situation, and reno Representation of the debtor at the meeting of credit | | | | |
| C. | Other provisions as needed Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on heading the secure of | ions as needed; preparation a | | | |
| б. В | y agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding. | | | es, relief from stay actions | s or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of a nkruptcy proceeding. | ny agreement or arrangement for p | payment to me for re | presentation of the debtor(s) in | n |
| Ar | ril 20, 2021 | /s/ Nathan I. Zimm | ermann | | |
| Da | | Nathan I. Zimmern | | | |
| | | Signature of Attorney Zimmermann Law | | | |
| | | 8989 N. Port Wash | | | |
| | | Suite 208 Bayside, WI 53217 | | | |
| | | 414-352-1970 Fax | | | |
| | | | | | |